SIGN PERMIT APPLICATION



Department of Urban Planning and Redevelopment

BUILDING CODE SERVICES DIVISION

955 S. Federal Highway • Fort Lauderdale, Florida 33316 • www.broward.org/building

2004 FLORIDA BUILDING CODE IN EFFECT

Folio #				Zone		
Lot	_ Block	Subdivision				
Estimated Job	Value \$					
Job Name						
Address						
City				ZIP (Code	
Owner's Name	·					
Address				Pr	none	
City				ZIP (Code	
Contracting Fi	rm					
Address				Pł	none	
City				ZIP (Code	
Cellular Phone	Cellular Phone Number Fax Number					
Architect/Engi	neer					
					none	
City				ZIP (Code	
Present Use _			Proposed	Use		
Number of: St	toriesI	BaysFamil	iesBe	edrooms	_Bathrooms	
☐ Pylon ☐	Building Wall	ulti Pole □ Fe □ Marquee/Canopy □ Non-Illuminated			Single-Face □ Double-Face	
Sign Purpose: Identification Bulletin	☐ Advertising☐ Entrance/E			☐ Temporary Cons		

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Bonding Company			
Address			
City	ZIP Code	Phone	
Mortgage Lender's Name			
Address			
City	ZIP Code	Phone	
Fee Simple Titleholder's Name			
Address			
City	ZIP Code	Phone	
Application is hereby made to obtain a permit to do the work commenced prior to the issuance of a permit and that all we struction in Broward County, Florida. I understand that a sep WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANK	ork will be performed to r parate permit must be se KS, AIR CONDITIONER	meet the standards of all laws regulating con- ecured for ELECTRICAL WORK, PLUMBING, S AND STRUCTURAL WORK, etc	
OWNER'S AFFIDAVIT: I certify that all the foregoing inform applicable laws regulating construction and zoning.	nation is accurate and the	at all work will be done in compliance with all	
"NOTICE: In addition to the requirements of this permit, the be found in the public records of this county, and there may as water management districts, state agencies or federal a	be additional permits re		
WARNING TO OWNER: YOUR FAILURE TO RECORD A TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. II LENDER OR AN ATTORNEY BEFORE RECORDING YOU	F YOU INTEND TO OB	TAIN FINANCING, CONSULT WITH YOUR	
Signature:	Signature:		
Owner or Agent (including Contractor)		Qualifier	
Printed Name of Owner		Printed Name of Qualifier	
Date	Date		
NOTARY as to Owner		NOTARY as to Qualifier	
My Commission Expires	My Commiss	ion Expires	
Certificate of Competency Holder			
State Certificate or Registration No.			
Certificate of Competency No			
Application Issued by			
	Permit Offi	icer	

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